

Michigan SB 540, SB 541

Michigan HB 5132, HB5133

March 15, 2012

Thank you, Madam Chairman and Ladies and Gentlemen of the Committee, my name is Susan Wozniak and I am here today representing the National Patient Advocate Foundation. Thank you for providing me with this opportunity to share my experiences relative to treatment disparity in cancer and request your support for oral chemotherapy access bills. I come to you as a registered nurse, licensed and practicing in Michigan for more than 30 years. I am an oncology certified nurse, who serves on the boards of the Metro Detroit Oncology Nursing Society and RN-AIM, the state of Michigan ANA (American Nurse Association) affiliate. I am also a caretaker for a family member who is currently struggling to wage a battle with a stage IV, the last stage, of cancer of an unknown primary and losing ground quickly.

My experience is primarily as an infusion nurse. I have supported thousands of patients through their chemotherapy infusions over the years. Many of those patients responded favorably. Yet, for many others, the IV drug was not the best treatment for them. Perhaps their disease stopped responding to the therapy. Maybe they could no longer physically tolerate that infusion drug and the associated side effects. Most recently, the FDA documents a crisis situation specific to injectable oncologics. Drug shortages mean the injectable drug is not available, yet an oral formulation exists to effectively prevent disease progression. Yet converting to an oral therapy, for many a Michigan cancer patient is not possible. To that patient and their family, the treatment as prescribed by their doctor, would result in out-of-pocket costs that are not bearable. Because, for them, the cost of that oral therapy would be financially crippling. Not only have these patients struggled with: pain, hair loss, nausea, vomiting and anemia, but now they have to choose between treatment and financial stability or solvency.

"Cancer Facts and Figures 2011" newly published by the American Cancer Society tells me that as a woman in the US, I have a 1 in 3 lifetime risk of developing cancer. If I were a man, my odds would be worse, 1 in 2.

As a life-long Michigan resident, a nurse, a caretaker and a potential cancer patient, I come to you asking that you ensure cancer patients living in Michigan receive the physician-recommended care needed to fight their disease. The proposed legislation does not dictate therapy, it eliminates disparities in health insurance coverage between oral and intravenous chemotherapy.

The superior or sometimes even the only evidence-based treatment may be a product available only in an oral formulation and it is inequitable that a patient would be responsible for a larger percentage of the treatment cost just because of the route of administration. All stakeholders in cancer care should support access to best medical practice. Tiered drug formularies for specialty oncology products impede patient access to potentially life-saving drugs.

Thank you for your time and consideration in this matter, and for your support of important legislation that strives to improve access to care for all Michigan cancer patients.

Susan Wozniak, MSHS, RN OCN

1171 Asher Court

Walled Lake, MI 48390

248-880-5712

National Patient Advocate (NPAF) ELITE President's Council, State of MI

President-Elect, RN-AIM (RN Association in Michigan)

Executive Board/Past-President, Metro Detroit Oncology Nursing Society

Parish Nurse, St. William Church, Walled Lake, MI

COMON (Coalition of Michigan Organizations of Nursing) Liaison

Member: American Nurses Association (ANA), Oncology Nursing Society (ONS), Association of Community Cancer Centers (ACCC), American Society of Health-System Pharmacists (ASHP), Infusion Nursing Society (INS), Sigma Theta Tau, Kappa Iota Chapter (International Nursing Honor Society), American Cancer Society Cancer Action Network